A. Review Details	Notes
Reference:	
Refid Number:	
First Author	
Year of Publication Place of Publication	
l lace of l ublication	
Peer or Grey	Peer reviewed
·	Grey literature
Type of Publication	Primary research
	Review or meta-analysis
	Commentary
	Protocol
	Conference proceeding
	Working paper Dissertation/thesis
	Report (NGO)
	Report (government)
	Fact sheet
	Policy/position statement
	News article/ Op-ed
B. Project Details	Other
Program/Project Name	
Country	
Location	
Geographical Setting	Urban
	Rural
	Rural-remote
Site of Study	Not specified/Not reported Aboriginal health/ friendship centres
Site of Study	Community health centre
	Dental Clinic
	General Healthcare
	Home Care
	Hospital
	Outpatient
	Government ART Center
	Primary care clinic/ Family health clinic
	Prisons/Correctional Facilities Sexual health/HIV Clinic
	Other
	Not specified/Not reported
Duration of study	less than one month
	1-3 months
	4-6 months
	7-11 months
	1-2 years 3-5 years
	6 years +
	Not specified/Not reported
C. Sample Characterisitcs	
Age	
Gender	Cisgender Male
	Cisgender Female
	Transgender male
	Transgender female
	Two-spirited Other
	Not specified/Not reported
Sub-community	MSM
•	

	LGBTQ
	PWID or people who smoke crack
	People who smoke crack
	Aboriginal peoples Racialized groups
	Transgender individuals
	Commercial sex workers
	Inmates
	People born outside of Canada
	Pregnant women
	People receiving ART Other
	Not specified/Not reported
Participant health status	Excellent
	Very good
	Good Fair
	Poor
	Other
	Not specified/Not reported
D. Methodology	
Aim of study	Access to Care
	Satisfaction with Care
	Barriers to Care
	Barriers to ART Other
	Not specified/Not reported
Study approach	Quantitative
	Qualitative
	Mixed-methods
Study design	RCT
	Non-randomized control trial Case report
	Case series
	Case-control
	Cross-sectional
	Cohort study
	Correlation study Ethnography
	Grounded theory
	Narrative research
	Phenomenological research
	Observational
	Community based research design
	Systematic reviews Meta-analysis
	Scoping reviews
	Field trials
	Other
Data collection method	Interview Survey
	Focus group
	Observation
	Case study
	Document review/analysis
g	Other
Sampling	Non-probability Probability
Sample Size	Trooutinty
Participation Rate	
Tool	
E. Findings	
Type of Service	Pharmaceutical
	Primary care
	Clinical/curative Dental
	Preventative
	Outpatient
•	

	Inpatient Social Promotive Rehabilitative General Health Care Mental Health Care Not reported Other
Compensation	Yes No Not applicable/ not reported
Service Provider	Doctor Nurse Dentist Dental Assistant Pharmacist Outreach Worker Social Worker Psychologist Other Not specified/Not reported
Outcome Measures	Acceptability - Supply Complexity of billing system Staff interpersonal skills Technology Characteristics of the health services Other Acceptability - Demand Households' expectations Low self-esteem and little assertiveness Community and cultural preferences, attitudes and norms Stigma Health awareness User's attitudes and expectations Trust, feel welcomed Feel Known Other Accessibility Perceived Access Gaining entry into the health care system. Having a regular doctor Continuity of care services # of visits/# services used Other Accessibility - Supply Service location Other Accessibility - Demand Indirect costs to household (transport) Means of transport available Other Accommodation/Adequacy Accommodation/Adequacy - Supply Opening hours Other Accommodation/Adequacy - Demand Clean and well-kept facility Appointment scheduling Other Affordability - Supply Costs and prices of services, including informal payments Private-public dual practices Other Affordability - Demand Household resources and willingness to pay Opportunity costs

Cash flow within society

Other

Availability

Availability- Supply

Unqualified health workers,

Staff absenteeism

Waiting time

Motivation of staff

Drugs and other consumable

Non-integration of health services

Lack of opportunity (exclusion from services)

Late or no referral

Other

#### Availability -Demand

Information on health care services/providers

Education

Other

#### **Barriers**

Physical

Financial

Sociocultural

Organizational

Personal

Health/Medical reasons

Other

#### Communication

Person-centeredness

Patient-provider relationship

Patient Empowerment

#### Preferences

Satisfaction

**Equity in Access** 

**Patient Demographics** 

#### Other

#### Significant outcomes-quantitative

### Acceptability

# Acceptability- Supply

High complexity of billing system

Low complexity of billing system

Staff interpersonal skills- High

Staff interpersonal skills- Low

Has the appropriate technology

Does not have the appropriate technology

Data correlates- Characteristics of the health services

Other

## Acceptability -Demand

Met Households' expectations

Did not meet households' expectations

Low self-esteem and little assertiveness

Community and cultural preferences, attitudes and norms

Stigma- High

Stigma- Low

High health awareness

Lack of health awareness

User's attitudes and expectations

Trust, feel welcomed- High

Trust, feel welcomed- Low

Feel known- High

Feel known- Low Other

## Accessibility

### Perceived Access

Gaining entry into the health care system- Easy

Gaining entry into the health care system- Hard

Having a regular doctor

High continuity of care

low continuity of care

access to sites of care for needed services- Easy

access to sites of care for needed services- Hard

# of visits/# services used

Other

#### Accessibility -Supply

Service location- Good

Service location- Poor

Other

#### Accessibility -Demand

Indirect costs to household (transport)- High

Indirect costs to household (transport)- Low

Means of transport available

Other

#### Accommodation/Adequacy

## Accommodation/Adequacy- Supply

Opening hours- Good

Opening hours-Poor

Other

#### Accommodation/Adequacy -Demand

Clean and well-kept facility

Appointment scheduling- Good

Appointment scheduling- Poor

Other

#### Affordability

#### Affordability -Supply

Costs and prices of services, including informal payments- High

Costs and prices of services, including informal payments- Low

Private-public dual practices

Other

#### Affordability -Demand

Household resources and willingness to pay- High

Household resources and willingness to pay- Low

Opportunity costs- High

Opportunity costs- Low

Cash flow within society- High

Cash flow within society- Low

Other

#### Availability

## Availability- Supply

Unqualified health workers

Staff absenteeism

Waiting time- High

Waiting time- Low

Motivation of staff- High

Motivation of staff- Low

Drugs and other consumable- often available

Drugs and other consumable- hardly ever available

Non-integration of health services

Lack of opportunity (exclusion from services)

Late or no referral

Other

## Availability -Demand

Information on health care services/providers- High

Information on health care services/providers- Low

Education-High

Education-Low

Other

### **Barriers**

Physical (eg. Geographic, transportation ect.)

support ect.)

of support, stigma ect.)

Organizational (policies, procedures ect.)

Personal (active drug use, low motivation, other conditions)

Health/Medical reasons

Other

### Communication (general)- High

## Communication(general)- Low

Person-centeredness- High

Person-centeredness- Low

Patient-provider relationship- Good

Patient-provider relationship- Bad

Patient Empowerment- High

Patient Empowerment- Low Preferences of care Satisfaction with Services/Care-High Satisfaction with Services/Care- Low **Equity in Access- Good Equity in Access- Poor Patient Demographics** Other Not reported Acceptability Qualitative and non-significant outcomes Acceptability- Supply High complexity of billing system Low complexity of billing system Staff interpersonal skills- High Staff interpersonal skills- Low Has the appropriate technology Does not have the appropriate technology Data correlates- Characteristics of the health services Other Acceptability -Demand Met Households' expectations Did not meet households' expectations Low self-esteem and little assertiveness Community and cultural preferences, attitudes and norms Stigma- High Stigma- Low High health awareness Lack of health awareness User's attitudes and expectations Trust, feel welcomed- High Trust, feel welcomed- Low Feel known- High Feel known- Low Other Accessibility Perceived Access Gaining entry into the health care system- Easy Gaining entry into the health care system- Hard Having a regular doctor High continuity of care low continuity of care access to sites of care for needed services- Easy access to sites of care for needed services- Hard # of visits/# services used Other Accessibility -Supply Service location- Good Service location- Poor Other Accessibility -Demand Indirect costs to household (transport)- High Indirect costs to household (transport)- Low Means of transport available Accommodation/Adequacy Accommodation/Adequacy- Supply Opening hours- Good Opening hours-Poor Other Accommodation/Adequacy -Demand Clean and well-kept facility Appointment scheduling- Good Appointment scheduling- Poor Other Affordability Affordability -Supply

Costs and prices of services, including informal payments- High Costs and prices of services, including informal payments- Low

Private-public dual practices

Other Affordability -Demand Household resources and willingness to pay- High Household resources and willingness to pay- Low Opportunity costs- High Opportunity costs- Low Cash flow within society- High Cash flow within society- Low Other Availability Availability- Supply Unqualified health workers Staff absenteeism Waiting time- High Waiting time- Low Motivation of staff- High Motivation of staff- Low Drugs and other consumable- often available Drugs and other consumable- hardly ever available Non-integration of health services Lack of opportunity (exclusion from services) Late or no referral Other Availability -Demand Information on health care services/providers- High Information on health care services/providers- Low Education-High Education-Low Other **Barriers** Physical (eg. Geographic, transportation ect.) support ect.) of support, stigma ect.) Organizational (policies, procedures ect.) Personal (active drug use, low motivation, other conditions) Health/Medical reasons Other Communication (general)- High Communication(general)- Low Person-centeredness- High Person-centeredness- Low Patient-provider relationship- Good Patient-provider relationship- Bad Patient Empowerment- High Patient Empowerment- Low Preferences of care Satisfaction with Services/Care- High Satisfaction with Services/Care- Low **Equity in Access- Good Equity in Access- Poor Patient Demographics** Other Not reported Conclusions Limitations